TROPE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of)
KIYA et al.) Art Unit 2871
Application Number: 10/777,173))) Eveniner I ver D Chien
Filed: February 13, 2004) Examiner Lucy P. Chien)
For: DISPLAY DEVICE AND MANUFACTURING METHOD OF THE SAME))
Attorney Docket No. HITA.0514)
Commissioner of Patents	•
P.O. Box 1450	
Alexandria, VA 22313-1450	
COVER LETTE	ER .
Sir:	

[x] The fee for submission of claims is calculated as shown below:

For	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims			x \$52	0	
Independent Claims	2	. 2	(Over 3)	x \$220	0
MULTIPLE DEPENDENT CLAIM(S)				+ \$390	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED					
		ТОТА	L	0	

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

[x]	Response/Amendment to Office Action	[x]	Petition for 1 -month Extension of Time
	(with Claim Amendments)	[]	Information Disclosure Statement w/ form 1449
	Preliminary Amendment	[]	Letter to Draftsperson
[Substitute Specification	[]	sheets of replacement drawings
<u> </u>	Terminal Disclaimer	$\bar{[}$	Request for Continued Examination

[]	Please charge my Deposit Account Number the fees for A duplicate copy of t	in the amount ofhis paper is enclosed.	to cover
[x]	A check in the amounts of \$130.00 to cover the 1-m	nonth extension of time fee is	enclosed.
[x]	The Commissioner is hereby authorized to charge communication or credit any overpayment to Deno	•	

Respectfully submitted,

Juan Carlos A. Marquez Registration Number 34,072

REED SMITH LLP

3110 Fairview Park Drive, Suite 1400 Falls Church, Virginia 22042 (703) 641-4200 June 9, 2009

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[x] The fee for submission of claims is calculated as shown below:

For	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS ALREADY PAID	RATE	CALCULATION
Total Claims	20	20	(Over 20)	x \$52	0
Independent Claims	2	2	(Over 3)	x \$220	. 0
MULTIPLE DEPENDENT CLAIM(S)				+ \$390	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, x ½ 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED					
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[x]	A check in the amounts of \$130.00 to cover the 1-month extension of time fee is enclosed.
[x]	The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to Deposit Account Number 08-1480 .

Respectfully submitted,

Juan Carlos A. Marquez Registration Number 34,072

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